

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

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|------------------------|--|
| Application Number | 09/943,080 |
| Filing Date | August 30, 2001 |
| First Named Inventor | Carlo EFFENHAUSER et al. |
| Title | SYSTEM FOR WITHDRAWING SMALL AMOUNTS OF BODY FLUID |
| Art Unit | 3736 |
| Examiner Name | Szmal, Brian Scott |
| Attorney Docket Number | 7404-727 |

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number: 41577

OR

☐ Practitioner(s) named below:

| Name | Registration Number |
|------|---------------------|
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

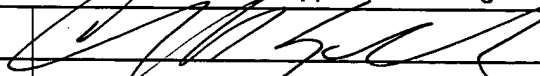
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|--|--|-------|--|-----|--|
| <input type="checkbox"/> Firm or Individual Name | | | | | |
| Address | | | | | |
| City | | State | | Zip | |
| Country | | | | | |
| Telephone | | Email | | | |

I am the:

☐ Applicant/Inventor

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-------------------|---|-----------|-----------------|
| Signature |  | Date | August 22, 2005 |
| Name | Charles P. Schmal, Registration No. 45,082 | Telephone | (317) 634-3456 |
| Title and Company | Appointed Practitioner to Act on Behalf of Customer Number 41577 | | |

NOTE: Signatures of all of the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby appoint:

☒ Practitioners associated with the Customer Number:

41577

OR

☐ Practitioner(s) named below (If more than ten patent practitioners are to be named, then a customer number must be used):

| Name | Registration Number |
|------|---------------------|
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as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

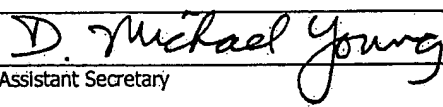
Assignee Name and Address:

**Roche Diagnostics Operations, Inc.
9115 Hague Road
Indianapolis, Indiana 46250**

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

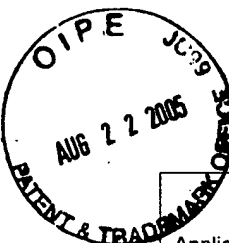
SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

| | | | |
|-----------|---|-----------|---------------|
| Name | D. Michael Young | | |
| Signature |  | Date | July 30, 2004 |
| Title | Assistant Secretary | Telephone | 317-521-7340 |

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**STATEMENT UNDER 37 CFR 3.73(b)**

Applicant/Patent Owner: Carlo EFFENHAUSER et al.
Application No./Patent No: 09/943,080 Filed/Issue Date: August 30, 2001
Entitled: SYSTEM FOR WITHDRAWING SMALL AMOUNTS OF BODY FLUID
Roche Diagnostics Corporation a, Company
(Name of Assignee) (Type of Assignee, e.g., Corporation, Partnership, University, Government Agency, etc.)

States that it is:

1. ☒ The assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title, and interest.
The extent (by percentage) of its ownership interest is: _____ %.

In the patent application/patent identified above by virtue of either:

- A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____ or for which a copy thereof is attached.

OR

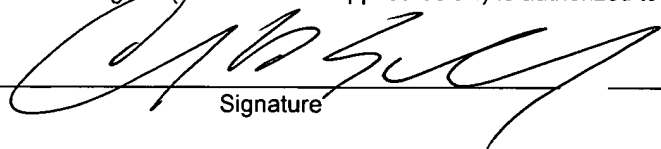
- B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: Carlo Effenhauser, Heinz-Michael Hein, Karl-Heins Koelker, and Frank Deck
To: Roche Diagnostics GmbH
The document was recorded in the United States Patent and Trademark Office at Reel 012536,
Frame 0097 or for which a copy thereof is attached.
2. From: Roche Diagnostics GmbH
To: Roche Diagnostics Corporation
The document was recorded in the United States Patent and Trademark Office at Reel 012549,
Frame 0850 or for which a copy thereof is attached.
3. From: Roche Diagnostics Corporation
To: Roche Diagnostics Operations, Inc.
The document was recorded in the United States Patent and Trademark Office at Reel 015215,
Frame 0061 or for which a copy thereof is attached.

- ☐ Additional documents in the chain of title are listed on a supplemental sheet.
☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (*i.e.*, a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.


Signature _____ Date August 22, 2005
Charles P. Schmal _____
Typed or printed name _____ Telephone Number (317) 634-3456
Appointed Practitioner to Act on Behalf of
Customer Number 41577
Title _____